

Submit 1 Copy To Appropriate District Office  
 District I - (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II - (575) 748-1283  
 811 S. First St., Artesia, NM 88210  
 District III - (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV - (505) 476-3460  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised August 1, 2011

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO. 30-015-24097
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Smith 10 Com
8. Well Number 1
9. OGRID Number 160825
10. Pool name or Wildcat Wildcat, Upper Penn (72150)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3719' GL

**SUNDRY NOTICES AND REPORTS ON WELLS**  
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well  Gas Well  Other

2. Name of Operator  
BC Operating, Inc.

3. Address of Operator  
P.O. Box 50820 Midland, Texas 79710

4. Well Location  
 Unit Letter G : 2310 feet from the North line and 1980 feet from the East line  
 Section 10 Township 24S Range 27E NMPM County Eddy

5. Well Location (Handwritten)  
*Black River, Atoka, East (GAS)*

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Recomplete to Atoka <input checked="" type="checkbox"/>	

13. Describe proposed or completed operations: (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Subsequent Report to recomplete well to the Atoka formation:  
 07/29/15: Unable to pull production tbg. Cut tbg @ 11,725'.  
 POOH w/tbg. Set CIBP @ 11,680'  
 07/30/15: Dump bailed 15' of cement on top of plug.  
 Tagged cmt @ 11,666' w/ wireline.  
 Ran CBL from 11,650' - TOC @ 2200'.  
 07/31/15: Tested 7" intermediate & 4 1/2" liner to 2500#  
 RIH w/TCP guns on 2 3/8" tbg & set pkr @ 11,490'.  
 08/01/15: Perforated Atoka interval 11,580' - 11,600'  
 Acidized Atoka w/3500 gals Mod 101 acid w/1000 scf/bbl N2.  
 Flow tested well - Interval non-productive.

**NM OIL CONSERVATION**  
 ARTESIA DISTRICT  
 AUG 31 2015  
 RECEIVED

*SI status  
 8-1-15*

Spud Date: 2/22/1982      Rig Release Date: 4/8/1982

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Pam Stevens TITLE Regulatory Analyst DATE 08/26/2015  
 Type or print name Pam Stevens E-mail address: pstevens@bcoperating.com PHONE: 432-684-9696

**For State Use Only**

APPROVED BY: [Signature] TITLE Dist. Reperson DATE 9/3/15  
 Conditions of Approval (if any): C102-Atoka + C105